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Approved for use through 12/31/2008. OMB 0851-20035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. 10/527,536 Application Number CHANGE OF 03/11/2005 CORRESPONDENCE ADDRESS Filing Date Application smael Gracia Bobed First Named Inventor Art Unit Address to: Commissioner for Patents Examiner Name P.O. Box 1450 Alexandria, VA 22313-1450 2002P01188WOUS Attorney Docket Number Please change the Correspondence Address for the above-identified patent application to: The address associated with <u>~</u> Customer Number: 000046726 OR Firm or Individual Name Address City State Zip Country Telephone Email This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: Applicant/Inventor Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Attorney or agent of record. Registration Number 48,557 Registered practitioner named in the application transmittal letter in an application without an executed eath or declaration. See 37 CFR 1.33(a)(1). Registration Number Signature Typed or Printed Crafg J. b Name Telephona 252-672-7930 Date October 10, 2008 NOTE: Signatures of all the inventors or assignees of record of the critic interest or their representativo(s) are required. Submit multiple forms if more than one signature is required, see below forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Attorney Docket No.: 2002P01188WOUS

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SERIAL NO.:

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Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

CERTIFICATE OF FACSIMILE TRANSMISSION REQUEST FOR CHANGE OF CORRESPONDENCE ADDRESS

I hereby certify that Form PTO/SB/122 is being faxed herewith to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 at (571) 273-8300 on the date shown below.

Undersigned counsel has received the Corrected Filing Receipt for the above-identified application. However, we note that the Customer Number has not been associated with the current application. Applicant herewith encloses the Change of Correspondence Address Application,

It is respectfully requested that the Patent Office Records be changed to correct this omission.

Respectfully submitted.

Name of Person Signing

Registration No. 48,557

October 10, 2006

Date

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Total number of faxed pages is 2, including Request for Change of Correspondence Address and cover sheet.